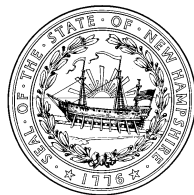


# **NEW HAMPSHIRE DEPARTMENT OF CORRECTIONS**

## **REQUEST FOR PROPOSAL**



**NHDOC 11-02-GFHR**

**Pre-Assignment and Fitness for Duty Exam Services**

**ISSUE DATE: December 17, 2010**

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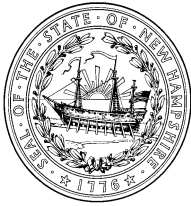
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**STATE OF NEW HAMPSHIRE  
DEPARTMENT OF CORRECTIONS  
DIVISION OF ADMINISTRATION**

P.O. BOX 1806  
CONCORD, NH 03302-1806

603-271-5610 FAX: 603-271-5639  
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**William L. Wrenn**  
Commissioner

**Bob Mullen**  
Director

December 17, 2010

**Request for Proposal (RFP)  
Terms and Conditions**

RFP Title: Pre-Assignment and Fitness for Duty Exam Services

RFP Number: NHDOC 11-02-GFHR

RFP Due Date: February 11, 2011, no later than 2:00PM, EST

RFP Service Region: Northern NH Correctional Facility (NCF), Berlin, NH and Southern NH Correctional Facilities: NH State Prison for Men (NHSP-M) and the Secure Psychiatric Unit (SPU), Concord, NH and NH State Prison for Women (NHSP-W), Goffstown, NH.

**NH Department of Corrections Mission Statement:** *Our Mission is to provide a safe, secure, and humane correctional system through effective supervision and appropriate treatment of offenders, and a continuum of services that promote successful re-entry into society for the safety of our citizens and in support of crime victims.*

This mission is supported through contracts with non-profit corporations; public corporations; public agencies (agency or department of municipal, county or state government); or by private proprietorships, partnerships, or corporations; or a consortium of public, non-profit, and private entities, that are awarded contracts through the State of New Hampshire Request for Proposals process. These entities are herein after known as the "Vendor," "Contractor" or "Bidder."

**SECTION A: Terms, Conditions and Procedures for Submitting Proposals**

**1. Brief Description:**

Attached is a Request for Proposals and Contract format for the provision of Pre-Assignment and Fitness for Duty Medical Exam Services to be completed by Board Certified Occupational Health Physicians, certified Advanced Registered Nurse Practitioners (ARNP) or certified Physician Assistants (PA) duly licensed to practice in the State of New Hampshire for the New Hampshire Department of Corrections (herein known as the "NHDOC," "State," "Corrections" or "Department").

**2. Performance Period:**

Contract(s) awarded by the NH Department of Corrections as a result of this RFP is expected to be effective for the period beginning July 1, 2011 through June 30, 2013 with an option to renew for one (1) additional period of up to two (2) years only after the approval by the Commissioner of Corrections and the Governor and Executive Council (G&C) of the State of New Hampshire.

Vendor Initials: \_\_\_\_\_

**Request for Proposals (RFP)**  
**Terms and Conditions**

**3. Vendor Conference: (NOT APPLICABLE)**

**4. Facility Tours: (NOT APPLICABLE)**

**5. Proposal Inquiries:**

An individual who is authorized to commit the organization to provide the services necessary to meet the requirements of this RFP must submit all inquiries.

- 5.1. Inquires shall be received no later than 2:00PM EST, on January 7, 2011.
- 5.2. Answers to all written inquiries received will be posted on the NH Department of Corrections website: <http://www.nh.gov/nhdoc/business/rfp.html> on or prior to January 14, 2011.
- 5.3. All inquiries concerning this RFP shall be made in writing, citing the RFP Title, RFP Number, Page, Section, Paragraph and submitted to:

NH Department of Corrections Bureau of Human Resources P.O. Box 1806 Concord, NH 03302-1806 Tel: (603) 271-5640 Fax: (603) 271-3345 <a href="mailto:lcourrier@nhdoc.state.nh.us">lcourrier@nhdoc.state.nh.us</a>
--

**6. Last Date for Vendor Inquiries:**

Inquiries shall be received no later than 2:00PM EST, on January 7, 2011. Inquiries received after this date and time shall be addressed only if they are deemed by the NH Department of Corrections to be critical to the competitive bid process. An official written answer shall be posted on the NH Department of Corrections website to all questions meeting these requirements.

**7. Last Date for Letter of Intent:**

Letter of Intent to Bid shall be received no later than 10:00AM EST, on January 21, 2011 and is located as the last page of this RFP.

**8. Specifications:**

Vendors must submit proposals as specified. Vendors shall be notified in writing if any changes to the proposal specifications are made. Verbal agreements or instructions from any source are not authorized.

**9. Proposal/Format Submissions:**

- 9.1. Please submit **one (1) original** and complete proposal, to include the Terms and Conditions pages, signed and initialed as appropriate on each page in **blue ink**. The original copy must be typed or clearly printed in **black ink**. All corrections **must be initialed** by the contract signatory.
- 9.2. In addition, submit **two (2) photocopies**, fully executed, and **one (1) CD** of the proposal.
- 9.3. Proposals that are not complete or unsigned shall be considered "technically non-compliant."
- 9.4. Proposals received after the deadline shall be considered "technically non-responsive." The prospective Vendor shall be so notified by the NH Department of Corrections and the proposal shall be sent back to the prospective Vendor unopened and unevaluated.
- 9.5. Proposals **must be sealed** or they shall not be accepted.
- 9.6. **Do not staple** any part of the proposals. **Do not use three (3) ring binders** for any part of the proposals.

Vendor Initials: \_\_\_\_\_

**Request for Proposals (RFP)**  
**Terms and Conditions**

- 9.7. Please use only binder clips to secure and/or separate sections of the proposals.
- 9.8. **Sealed proposals shall follow the sequence of the Proposal Check Sheet.**
- 9.9. Absence of any documentation identified in the Proposal Check Sheet may be considered "technically non-compliant."
- 9.10. Proposals shall be submitted by the prospective Vendor and received by the NH Department of Corrections no later than 2:00PM, EST on February 11, 2011 to be considered.
- 9.11. **All corrections shall be initialed by the prospective contract signatory; correction tape or white out shall not be used on any Contract documents.**

**10. Submission Criteria:**

Proposals that are not complete or unsigned shall not be considered. Any proposal received after the deadline shall be considered "technically non-responsive" and the Vendor will be so notified by the NH Department of Corrections.

**11. Document Alterations/Changes/Omissions:**

It is unlawful to make any alterations to the text or format of this document, or the text or format of any addendum, or attachment to this document. A signature on the Cover Sheet of the person authorized to legally bind the Vendor to the terms of this RFP signifies that no alterations have been made to the original text or format of this RFP. Any alterations made to the original text of this document may result in the proposal being considered "technically non-compliant."

**12. Evaluation Criteria/Procedure:**

- 12.1. Proposals shall be subject to a procedural review by the Contract Administrator prior to any other evaluation review to ensure the proposals submitted:
  - 12.1.1. conform to instructions and format contained within the RFP;
  - 12.1.2. is properly executed and complete; and
  - 12.1.3. contains all required supporting documentation.

**13. Other Contractual Documents Provided by the NH Department of Corrections:**

The State Long Form Contract, form P-37, version 1/09, the Alternate W-4 and the Certificates of Vote/Authority are located as a separate link on the New Hampshire Department of Corrections website: <http://www.nh.gov/nhdoc/business/rfp.html>

**14. Labeling and Addressing the Proposal for Submission:**

Please clearly mark the outside of your envelope **Pre-Assignment and Fitness for Duty Exam Services (NHD0C 11-02-GFHR)**. Proposals must be received by the Contract Administrator, P.O. Box 1806, Concord, NH 03302-1806 or hand delivered to Room 324, on the third (3<sup>rd</sup>) floor of the Main Building of the Governor Gallen State Complex, 105 Pleasant Street, Concord, NH, 03301 no later than **February 11, 2011 at 2:00PM EST**, to be considered.

**15. Cancellation:**

The NH Department of Corrections reserves the right to accept or reject any or all proposals and to cancel this RFP in whole or in part upon written or published notice of intent to do so. Financial responsibility for the preparation of proposals is the sole responsibility of the Vendor.

**16. Financial Commitment:**

Financial commitment by the NH Department of Corrections shall not occur until such time as the Governor and the Executive Council of the State of New Hampshire approve a Contract.

Vendor Initials: \_\_\_\_\_

**Request for Proposals (RFP)**  
**Terms and Conditions**

**17. Rejection of Proposals:**

- 17.1. Proposals may be rejected at any time at the discretion of the Director of Administration if the Vendor:
  - 17.1.1. has any interest that shall, in the sole discretion of NH Department of Corrections, conflict with performance of services for the State;
  - 17.1.2. fails to demonstrate to the satisfaction of NH Department of Corrections that it is in sound financial condition;
  - 17.1.3. fails to make an oral presentation if requested by NH Department of Corrections at a time, place and in a manner satisfactory to NH Department of Corrections; and
  - 17.1.4. fails to reach agreement with NH Department of Corrections on any and all Contract terms.

**18. Other Remedies for “Technically Non-Compliant” Proposals:**

- 18.1. The NH Department of Corrections, in its sole discretion, may determine that non-compliance with any RFP requirement is insubstantial. In such cases the NH Department of Corrections may:
  - 18.1.1. seek clarification;
  - 18.1.2. allow the Vendor to make corrections; or
  - 18.1.3. apply a combination of the two remedies.

**19. Addendum(s) and/or Amendment(s) to, or Withdrawal of the RFP:**

- 19.1. If NH Department of Corrections decides to amend or clarify any part of this RFP, a written amendment shall be provided to all Vendors on the NH Department of Corrections website: <http://www.nh.gov/nhdoc/business/rfp.html>.
- 19.2. The NH Department of Corrections, at its discretion, may amend the RFP at any time prior to the award of a Contract and/or terminate this procurement in whole or in part at any time.
- 19.3. The NH Department of Corrections at its discretion may request clarification from a Vendor of a proposal submitted.
- 19.4. Whereas the Department may modify the RFP and as a result of a modification the Department believes that Vendors will not have enough time to effect changes necessary to their proposal(s) prior to the Proposal Due date listed in Table 33.1., the Department may postpone the Proposal Due date for a period of up to thirty (30) days in the best interest of the State and/or to allow for fairness in the competitive bidding process. Notice of this postponement shall be posted on the NH Department of Corrections website with the RFP prior to the Proposal Due Date listed in this RFP.

**20. Proposal Submission:**

- 20.1. Prospective Vendors shall comply with instructions as specified in the Terms and Conditions of the RFP, submit all documents with the Proposal as identified in the Proposal Check Sheet and ensure sealed offers are received by the date, time and location identified herein.
- 20.2. The Vendor is cautioned that their proposal shall be subject to acceptance by the NH Department of Corrections without further clarification.

**21. Competition:**

The NH Department of Corrections encourages free and open competition among Vendors. Proposal specifications and conditions are designed to accomplish this objective, consistent with the NH Department of Corrections needs and guidelines.

Vendor Initials: \_\_\_\_\_

**Request for Proposals (RFP)**  
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**22. Collusion:**

The Vendor's signature on a proposal submitted in response to this RFP guarantees that the prices quoted have been established without collusion with other eligible Vendors and without effort to preclude the State of New Hampshire from obtaining the best possible competitive proposal.

**23. Disclosure of Sealed Proposal:**

A Vendor's disclosure or distribution of proposals other than to the NH Department of Corrections shall be grounds for disqualification.

**24. Oral Presentation:**

Prior to the determination of the award, a Vendor may be required to make an oral presentation to clarify any portion of their response or to describe how the service requirements shall be accomplished. Vendor finalists may be asked to conduct the presentation at a time period designated by the NH Department of Corrections.

**25. Terms of Submission:**

All material received in response to this RFP shall become the property of the NH Department of Corrections and shall not be returned to the Vendor. Regardless of the Vendor selected, the NH Department of Corrections reserves the right to use any information presented in a proposal. The proposal content that makes up the Vendors awarded Contract shall become public information upon approval of the Governor and Executive Council.

**26. Vendor Responsibility:**

The successful Vendor shall be solely responsible for meeting all terms and conditions specified in the RFP, their proposal and any resulting Contract and any renewal Contracts thereof.

**27. Evaluation of Proposals and Award of Contract:**

- 27.1. The NH Department of Corrections has approved this RFP for issuance. The RFP process is a procurement option allowing the NH Department of Corrections to award a Contract based upon the evaluation criteria established by the NH Department of Corrections.
- 27.2. Evaluation of proposals shall be based on evaluation criteria established by the NH Department of Corrections.
- 27.3. The NH Department of Corrections, may, upon determining that no satisfactory responses to this RFP have been received for these services, negotiate with a successful applicant for a related service to include this particular service as part of the service package and/or issue another RFP for this particular service.
- 27.4. Upon review by the NH Department of Corrections and approval by the Governor and Executive Council, the signed Contract shall become valid.

**28. Liability:**

The NH Department of Corrections shall not be held liable for any costs incurred by the Vendor in the preparation of their proposal or for work performed prior to Contract issuance.

**29. Best Interest of the State:**

If the NH Department of Corrections determines it is in the best interest of the State, it may seek a "*BEST AND FINAL OFFER*" from Vendors submitting acceptable and/or potentially acceptable proposals.

Vendor Initials: \_\_\_\_\_



**Request for Proposals (RFP)**  
**Terms and Conditions**

- 29.1. The “*BEST AND FINAL OFFER*” would provide Vendors the opportunity to amend or change its original proposal(s) to make it more acceptable to the State. The NH Department of Corrections reserves the right to exercise this option.
- 29.2. The “*BEST AND FINAL OFFER*” shall provide the NH Department of Corrections the opportunity to modify volume indicators and cost categories, if applicable, identified in Exhibit B of the RFP. Such request of the New Hampshire Department of Corrections would provide the Vendor(s) the opportunity to amend or change its original proposal to make it more acceptable to the State. The NH Department of Corrections reserves the right to exercise this option.

**30. Cover Letter Written Narrative Criteria:**

- 30.1. For the purpose of the this RFP, the NH Department of Corrections is seeking prospective Vendors to establish a Contract(s) for Pre-Assignment and Fitness for Duty Medical Exams services to be used over an extended period of time as identified in Section Two (2), Performance Period, Terms and Conditions of this RFP. It is important that the prospective Vendors demonstrate a sound presence in the market, capability and skill to provide requested services and long term viability judged by financial stability.
- 30.2. Prospective Vendors shall provide a concise two (2) to four (4) page written narrative in the form of a Cover Letter, on the organization’s letter head, identifying the following information: Ability to Provide Services and Financial Stability, Organizational Resources and Capability.

30.2.1. Ability to Provide Services:

- ability to provide immediate services upon an approved contract by the Governor and Executive Council.
- credentials and correctional experience demonstrated through qualifications/ licensures/certifications of employees who will providing requested services.

30.2.2. Financial Stability, Organizational Resources and Capability:

- demonstrate financial stability by providing financial statements, preferably audited, for two (2) consecutive years and copies of any quarterly financial statements prepared since the end of the period reported by your most recent annual report. Acceptable financial verification must include one (1) of the following; please check off and submit with your Proposal one of the following:

Check	Description
<input type="checkbox"/>	a copy of the organization’s most recent full set of financial statements
<input type="checkbox"/>	a copy of the organization’s audited set of financial statements from an independent CPA firm

- description of organizational resources and capability. Evidence demonstrating that your organization possesses adequate organizational resources and capability to meet consumer demand. Evidence may include, but is not limited to: implementation plan, staffing resources, equipment: type, age and whether the equipment is owned or leased as it relates to the scope of services requested outlined in this RFP, operation and quality controls. Evidence demonstrating your organization’s history, mission, size, ownership and structure (Corporation, LLC, Sole Proprietor, Non-Profit et cetera).

Vendor Initials: \_\_\_\_\_

**Request for Proposals (RFP)**  
**Terms and Conditions**

**31. Proposal Review and Evaluation Criteria:**

- 31.1. The NH Department of Corrections shall conduct an objective review of the proposal(s) received in response to this RFP process. The evaluation will be based on the demonstrated capabilities and skills of the prospective Vendor in relation to the needs of the services to be provided as set forth in this RFP.
- 31.2. The NH Department of Corrections will award a Contract based on the following:
- 31.2.1. Total Estimated Cost;
  - 31.2.2. Ability to Provide Services;
  - 31.2.3. Financial Stability, Organizational Resources and Capability; and
  - 31.2.4. References.
- 31.3. References shall be submitted. Please provide a list of all current and former clients, institutions and/or agencies from the past two (2) years using similar products and systems. The Vendor shall grant the NHDOC permission to contact the references upon submission of reference information. Please provide the following information for each reference:
- 31.3.1. Name and address of organization;
  - 31.3.2. Name, title, e-mail address and telephone and fax number of contact person; and
  - 31.3.3. Website address and performance period.
- 31.4. The NH Department of Corrections reserves the right to select one or more Vendor(s) in order to adequately service the geographic area(s) defined in Exhibit A.  
The NH Department of Corrections reserves the right to accept or reject any proposal and to waive any minor irregularities in any proposal.

**32. Scoring of Evaluation Criteria:**

- 32.1. Table of Scoring Criteria:

Category	Total Points Per Category
32.1.1. Total Estimated Cost: (60 points)	60
32.1.2. Ability to Provide Services: (25 Points)	25
32.1.2.1. Immediate Availability: Immediate start of services upon an approved Contract: (12.5 Points) 32.1.2.2. Credentials and Correctional Experience: (12.5 Points)	
32.1.3. Financial Stability, Organizational Resources and Capability (10 points)	10
32.1.3.1. Financial Stability: (5 points) 32.1.3.2. Evidence of Organizational Resources and Capability: (5 points)	
32.1.4. References: (5 points)	5
<b>Total of all Categories</b>	<b>100</b>

**Note:** The Financial Stability, Organizational Resources & Capability of contracted Vendor(s) is of great importance to New Hampshire Department of Corrections. A Vendor that does not score at least 8 out of 10 points, upon evaluation, in the Financial Stability, Organizational Resources and Capability category may be required to provide further financial information for the possibility of making their score satisfactory. In the event that the information provided does not satisfy the Department the NHDOC shall, at its own discretion, remove the Vendor from the RFP and contract procurement process in the best interest of the State. (See Item 30: "Cover Letter Written Narrative Criteria" herein for specifications).

Vendor Initials: \_\_\_\_\_

**Request for Proposals (RFP)**  
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**33. Schedule of Events (Timetable):**

33.1. Table of Events and Important Dates:

1	RFP Issued	December 17, 2010
2	Written Inquiries Due	January 7, 2011
3	NHDOC Posts Answers to Inquiries	January 14, 2011
4	RSVP Letter of Intent to Bid	January 21, 2011
5	Proposals Due	February 11, 2011
6	Best & Final Offer	If Necessary
7	Contract Finalization	February/March 2011
8	Anticipated Approval by the Governor and Executive Council	April 2011
9	Expected Services Start Date	Upon approval by the G&C

**Note:** The above Table of Events and Important Dates may be altered at any time by the Department with the exception of No. 5: "Proposals Due." The Vendors Proposals Due date cannot be changed in order to maintain the integrity of the public contract procurement process of the State of NH except for the reasons as stated in section - 19.4. of the Terms and Conditions of this RFP.

**34. Award of a Contract:**

- 34.1. The Vendor must bid on either the Northern Region (NH Correctional Facility) only, the Southern Region (NHSP-M, SPU and NHSP-W) only or both the Northern and Southern Regions.

**35. Special Notes:**

- 35.1. The headings and footings of the sections of this document are for convenience only and shall not affect the interpretation of any section.
- 35.2. The NH Department of Corrections reserves the right to accept or reject any or all proposals, to waive any minor irregularities in any proposal and to cancel this RFP in whole or in part upon written or published notice of intent to do so.
- 35.3. The solicitation of the Request for Proposal shall not commit the NH Department of Corrections to award a Contract.
- 35.4. The State and/or NH Department of Corrections shall not be responsible for expenses incurred by the Vendor's Professional Medical Staff and/or Vendor's Business Entity to maintain current medical licensures, certifications and continuing education costs.
- 35.5. Prior two-year major utilization benchmarks per regional area are as follows:

Description of Services	Previous Two Year Utilization	
	Northern Region	Southern Region
Pre-Assignment Physical Examination - Officers	6	51
Pre-Assignment Physical Examination - Civilians	15	25
Electrocardiogram (EKG)	4	1
Chest X-Ray	0	1
Hepatitis B Vaccine Series	2	4

Vendor Initials: \_\_\_\_\_

**PROPOSAL FOR:** The provision of Pre-Assignment and Fitness for Duty Medical Exam Services for the NH Department of Corrections (locations listed in Exhibit A). This section is for the purpose of ensuring that the Vendor has included all the required information to submit a Proposal. Partial Proposals of services for any regional area shall not be accepted.

**RFP NUMBER:** NHD0C (11-02-GFHR)

**LOCATION OF SERVICES:**

Northern NH Correctional  
Facility (Regional Area)

Southern NH Correctional  
Facilities (Regional Area)

**PLEASE TYPE OR CLEARLY PRINT IN THE SPACES PROVIDED BELOW.**

**OFFER:** The undersigned hereby proposes to furnish to the STATE OF NEW HAMPSHIRE, the services as described in the PROPOSAL in accordance with the specifications contained herein. The signer of the Vendor below signifies the assent of the Vendor to all of the Terms and Conditions of this RFP.

1. VENDOR: \_\_\_\_\_  
Name of Organization (As written on the Certificate of Good Standing)

2. ADDRESS: \_\_\_\_\_  
Street Address (Physical address of the organization - no PO Boxes)

\_\_\_\_\_  
City or Town State Zip Code

3. SIGNATURE: \_\_\_\_\_ INITIALS: \_\_\_\_\_

4. DATE SIGNED: \_\_\_\_\_

5. TITLE OF SIGNATORY: (Title of signatory) \_\_\_\_\_

6. NAME OF SIGNATORY: (Name of signatory) \_\_\_\_\_

7. CONTACT PERSON: (Contact person if different from signatory) \_\_\_\_\_

8. TELEPHONE: (Telephone number of contact person) \_\_\_\_\_

9. E-MAIL: (E-mail of contact person) \_\_\_\_\_

10. FAX: (Fax number of contact person) \_\_\_\_\_

Vendor Initials: \_\_\_\_\_

**FORMAT FOR SUBMISSION:** Please submit one (1) original and complete proposal for the Regional Area or Areas that your organization is interested in submitting a proposal for signed in **blue ink**. This original copy must be typed or clearly printed in black ink. All corrections shall be initialed by the contract signatory. Submit two (2) copies of the original Proposal and one (1) CD. Proposals that are not completed or unsigned may be considered "technically non-compliant." Any proposal(s) received after the deadline may be considered "technically non-responsive" and the Vendor will be notified by the NH Department of Corrections with the Proposal sent back to the Vendor unopened and unevaluated. Proposals must be sealed or they shall not be accepted. Proposals shall not be stapled or three-hole punched. Use only binder clips to secure and separate your proposals. Vendors **MUST** initial the bottom corner of each page of their Proposal.

If interested in submitting a proposal for these services, please fully complete, execute and return the following documentation in the sequence below:

- ☐ Cover Page:
  - Title of RFP;
  - RFP Number;
  - Vendors Organizational Name; and
  - Submission Date.
- ☐ Cover Letter (see criteria, section 30. within the RFP);
- ☐ Proposal Cover Sheet (please use the previous page for this document);
- ☐ Request for Proposal, Terms and Conditions;
- ☐ Contract Form P-37, version 1/09 ([P-37 Document](#)):
  - Please fully execute: Items 1.3, 1.4, 1.5, 1.11, and 1.12, in front of a Notary Public or Justice of the Peace and have them fill out Items 1.13, 1.13.1, and 1.13.2;
  - Note: THE NAME OF THE VENDOR'S ORGANIZATION SHALL BE WRITTEN ON THE P-37 AS FOUND ON THE CERTIFICATE OF GOOD STANDING (ISSUED BY THE NH SECRETARY OF STATES OFFICE) TO INCLUDE D/B/A NAMES OF THE ORGANIZATION, IF APPLICABLE.
- ☐ Exhibit A – Scope of Services;
- ☐ Exhibit B – Estimated Budget;
- ☐ Exhibit C – Special Provisions;
- ☐ Certificate of Good Standing (**not included herein; see instructions on next page**);
- ☐ Certificate of Authority (execute and submit only the one that applies to your entity): ([Corporation Certificate of Authority Vote w/ Corporate Seal](#), [Corporation Certificate of Authority Vote with Notary Seal](#), [Partnership Certificate of Authority Vote](#), [Sole Proprietor Certificate of Authority Vote](#), [Limited Liability Company Certificate of Authority Vote](#))
  - Note: THE NAME OF THE VENDOR'S ORGANIZATION MUST BE WRITTEN ON THE CERTIFICATE OF AUTHORITY AS FOUND ON THE CERTIFICATE OF GOOD STANDING TO INCLUDE D/B/A NAMES OF THE ORGANIZATION, IF APPLICABLE.
- ☐ Certificate of Insurance (**not included herein; see instructions on next page**):
  - Note: THE NAME OF THE VENDOR'S ORGANIZATION TO INCLUDE DBA NAMES, IF APPLICABLE, AS FOUND ON THE CERTIFICATE OF GOOD STANDING, AND ADDRESS OF THE VENDORS ORGANIZATION MUST BE IDENTIFIED IN THE INSURED SECTION OF THE CERTIFICATE OF LIABILITY INSURANCE DOCUMENT.
- ☐ Comprehensive General Liability Insurance Acknowledgement Form – ([Comprehensive General Liability Insurance Acknowledgement Form](#));
- ☐ Alternate W-9 Form ([W-9 Form Document](#));
- ☐ Statement of Financial Stability;
- ☐ References; and
- ☐ Copies of professional licensures, certifications and/or qualifications of the medical professional(s) providing the requested services.

Vendor Initials: \_\_\_\_\_

All documentation listed above is necessary for the successful completion and submission of Proposals. All attachments are located on the following webpage: <http://www.nh.gov/nhdoc/business/rfp.html> under the heading “*TOOLS AND RESOURCES FOR BIDDERS*.” (Direct link to above document web page: <http://www.nh.gov/nhdoc/business/RFPBiddingTools.htm>).

OTHER NECESSARY FORMS (Not included on the above web page, must also be provided by the Vendor):

- ❑ Certificate of Good Standing (NOT INCLUDED HEREIN, **must be provided by Vendor**): In order to obtain a Certificate, write directly to the Secretary of State, Corporate Division, State House Annex, Room 341, 25 Capital Street, 3<sup>rd</sup> Fl, Concord, NH 03301 or visit the Secretary of States Office in person. Requests must include the complete name of the company as it is registered with the Office of the Secretary of State and a check for (CALL FOR FEES) made payable to the State of New Hampshire. **If you wish to visit the Secretary of States Office in person and pay in cash, you must bring exact change for each Certificate of Good Standing document(s) requested.** In the event that you need to expedite the request, you may fax the request to (603) 271-3246 (CALL FOR FEES) for the expedited service. Include your mailing address, corresponding check number, telephone and fax number. You will receive a fax of the Certificate in addition to a original mailed copy.
- ❑ Certificate of Insurance (NOT INCLUDED HEREIN, **must be provided by Vendor**): You must contact your Insurance provider and follow their process to get this form **pursuant to section 14 and 15 of the State Long Form Contract** (Link: [P-37 Document](#)). The NH Department of Corrections, PO Box 1806, Concord, NH, 03302-1806 **must** be listed at the Certificate Holder on the document. Once obtained, if necessary, you may have your insurance provider fax the NH Department of Corrections a copy of the form. Faxes are to be sent to: (603) 271-5639, care of the Contract Administrator.
- ❑ The Certificate of Insurance must provide the following:
  - Shall designate the NH Department of Corrections as the Certificate Holder;
  - Shall designate the Certificate Holders address as: P.O. Box 1806, Concord, NH 03302;
  - Shall designate a ten (10) day written cancellation clause;
  - Shall designate your organizations name (to include d/b/a names if applicable) and address in the Insured section of the Certificate of Liability Insurance document.
  - Shall provide, for the life of the Contract and any renewals thereof, the minimum General Liability coverage to be no less than \$2,000,000.00 per each occurrence and \$2,000,000.00 general aggregate;
  - Shall provide proof and identify limits and expiration dates of Excess Umbrella Liability coverage (if applicable), Workers’ Compensation and Employers’ Liability coverage and Professional Liability or Business Owners Policy (if applicable);

**The remainder of this page is intentionally blank.**

Vendor Initials: \_\_\_\_\_

**SECTION B: Scope of Services, Exhibit A****1. Purpose:**

The Contractor shall provide Pre-Assignment and Fitness for Duty Exam Services in accordance to the medical guidelines adopted from the NH Police Standards & Training Council by Board Certified Occupational Health Physicians, certified Advanced Registered Nurse Practitioners (ARNP) or certified Physician Assistants (PA) duly licensed to practice in the State of New Hampshire for the NH Department of Corrections.

**2. Terms of Contract:**

Contract(s) awarded by the NH Department of Corrections as a result of this RFP is expected to be effective for the period beginning July 1, 2011 through June 30, 2013 with an option to renew, upon mutual agreement between the parties, for one (1) additional period of up to two (2) years only after the approval by the Commissioner of Corrections and the Governor and Executive Council (G&C) of the State of New Hampshire.

**3. Location of Services:**

3.1. Location of Services: The Northern Region shall consist of the Northern NH Correctional Facility, Berlin, NH. The Southern Region shall consist of the NH State Prison for Men (NHSP-M) and the Secure Psychiatric Unit, Concord, NH and the NH State Prison for Women (NHSP-W), Goffstown, NH. The Vendor(s) shall indicate below which Regional Area Location(s) (either Northern Region or Southern Region or both Regional Area locations) that they are interested in providing said services for the NH Department of Corrections by marking the gray box(es), below, with an X:

<input type="checkbox"/>	<b>Northern Region - NHDOC Northern NH Correctional Facility Location</b>		
	Northern NH Correctional Facility (NCF)	138 East Milan Road,	Berlin, NH 03570
<input type="checkbox"/>	<b>Southern Region - NHDOC Southern NH Correctional Facility Locations</b>		
	NH State Prison for Men (NHSP-M)	281 North State Street,	Concord, NH 03301
	Secure Psychiatric Unit (SPU)	281 North State Street,	Concord, NH 03301
	NH State Prison for Women (NHSP-W)	317 Mast Road,	Goffstown, NH 03045

3.2. Partial Proposals for requested services for the Southern Regional Area shall not be accepted.

**4. Credentials:** All examinations shall be performed by Board Certified Occupational Health Physicians, certified Advanced Registered Nurse Practitioners (ARNP) or certified Physician Assistants (PA) duly licensed to practice in the State of New Hampshire.

- 4.1. The Vendor will provide proof of licensures, certifications and/or qualifications of the professionals providing requested services.
- 4.2. The State and/or NH Department of Corrections shall not be responsible for expenses incurred by the Vendor's Professional Medical Staff and/or Vendor's business entity to maintain current medical licensures, certifications and continuing education costs.

**5. Average Projected Inmate/Patient Population: (NOT APPLICABLE)**

Vendor Initials: \_\_\_\_\_

## 6. Description of Pre-Assignment and Fitness for Duty Exam Services:

- 6.1. Pre-Assignment Examinations:
  - 6.1.1. Pre-Assignment Examinations will be scheduled after the applicant has accepted a conditional offer of employment.
  - 6.1.2. Documentation will be recorded on forms provided by the NH Department of Corrections.
  - 6.1.3. Applicants will receive a Physical Evaluation Packet at the time of the offer of employment (contents attached) and a completed Medical History Form prior to reporting for their examination.
  - 6.1.4. The examination will include:
    - 6.1.4.1. Medical and Occupational History;
    - 6.1.4.2. Physical Examination of all body systems;
    - 6.1.4.3. TB Screening:
      - a. Mantoux Skin Test will be administered to all applicants unless specifically waived by the NH Department of Corrections for section 6.1.5.2.
      - b. Symptoms check will be performed for individuals with history of previous positive skin test or determined by the examiner; and
      - c. Chest X-Ray (CXR) if applicable to be determined by the examiner;
    - 6.1.4.4. Audiology Screening via pure tone audiometer for Officer applicants only;
    - 6.1.4.5. Urinalysis (u/a) via dipstick; and
    - 6.1.4.6. Electrocardiogram (EKG) per community clinical standards.
  - 6.1.5. Addressing significant findings:
    - 6.1.5.1. Positive responses to Items 11-24 on the Medical History Form must be addressed and commented upon in Item 28 of that form; and
    - 6.1.5.2. Positive clinical findings in Items 7-20 on the Physical Examination Form and must be addressed in Item 21 of that form.
  - 6.1.6. Distribution:
    - 6.1.6.1. Applicant is to receive the following documents at the conclusion of the examination:
      - a. TB Screening/Immunization Record when Mantoux Skin Test is performed; if symptom check is performed, DO NOT give this form to the applicant;
      - b. Front Door Pass Memo;
      - c. The last copy of the Occupational Health Form;
      - d. Medical Follow-Up Notice, if applicable; and
      - e. Audiology Referral Memorandum and Medical Standards for recourse audiology testing, if applicable;
    - 6.1.6.2. NH Department of Corrections is to receive the **originals** of all forms included in the packet, marked "**Confidential**" and mailed to:

NH Department of Corrections  
Bureau of Human Resources  
Attn: Director of Human Resources  
P.O. Box 1806  
Concord, NH 03302-1806

Vendor Initials: \_\_\_\_\_



- 6.1.6.3. Vendor is to retain copies of form included in the packet.
- 6.1.6.4. **Any additional testing/procedures performed by the Vendor, other than an EKG and CXR as referred to previously, will require prior authorization and approval by the NH Department of Corrections, Director of Human Resources.**
- 6.2. Fitness for Duty Determination:
  - 6.2.1. General Fitness for Duty Examinations:
    - 6.2.1.1. At the request of the NH Department of Corrections, employees may be scheduled to have an evaluation of their health status as it relates to:
      - a. their physical capacity to perform their required duties, or; and
      - b. to the communicability of disease.
    - 6.2.1.2. These evaluations are tailored to the occupation of the employee and the environment in which the employee works.
  - 6.2.2. Duty-Specific Evaluations:
 

The evaluations are for the purposes of meeting acceptable safety and health practices for individuals who are required to use specialized equipment for particular duty assignments; to include, but not limited to the wearing of tight fitting respirators.

    - 6.2.2.1. The Contractor will execute a standard Medical Questionnaire Review for the fee specified in Exhibit B to include all administrative paperwork and phone consultations with the employee and/or the Administrator of Employee Health Services.
    - 6.2.2.2. If the examiner determines that an examination is necessary, the Medical Questionnaire Review fee will be waived and the Fitness for Duty fee as specified in Exhibit B will apply.
- 6.3. Immunizations:
  - 6.3.1. Correctional Officers and direct patient care Health Services staff will be offered the Hepatitis B vaccine, consisting of a series of three (3) injections.
  - 6.3.2. Administration of the series will begin after the date of hire.
  - 6.3.3. Employees are responsible for making and keeping appointments for receiving the vaccine.

## 7. General Service Provisions:

- 7.1. NH Department of Corrections Contact: The Director of Human Resources or designee shall contact the Vendor when service is needed.
- 7.2. Vendor Tools and Equipment: The Vendor must furnish the required tools and equipment necessary to provide the requested services of the Contract. Any tools, containers and vehicles the Vendor needs to provide the required services must be inventoried before entering and leaving the facility and are subject to search by NH Department of Corrections security staff at any and all times while on NH Department of Corrections facility grounds.
- 7.3. Rules and Regulations: The Vendor agrees to comply with all rules and regulations of the NH Department of Corrections.
- 7.4. Additional Facilities: Upon agreement of both parties, additional facilities belonging to the NH Department of Corrections may be added to the Contract. This provision will require Governor and Executive Council approval.
- 7.5. Vendor Employee Information: The Vendor will be responsible for providing the Name, Date of Birth (DOB), and Social Security number of all employees the Vendor plans to enter the NH Department of Corrections facilities.

Vendor Initials: \_\_\_\_\_

- The NH Department of Corrections will do a criminal record check on all prospective workers who might be assigned to any NHDOC facility. Anyone who is found to have a criminal record shall not be allowed to enter these facilities. Names must be submitted to the NH Department of Corrections, Director of Human Resources, P.O. Box 1806, Concord, NH 03302, at least seven (7) days before the persons are to work on-site. This rule applies for any new Vendor employees that are assigned to work at any NH Department of Corrections facility. This policy applies for the duration of the Contract.
- 7.6. Change of Ownership: In the event that the Vendor should change ownership for any reason whatsoever, the NH Department of Corrections shall have the option of continuing under the Contract with the Vendor or its successors or assigns for the full remaining term of the Contract, continuing under the Contract with the Vendor or, its successors or, assigns for such period of time as determined necessary by the NH Department of Corrections, or terminating the Contract.
- 7.7. Vendor Designated Liaison: The Vendor shall designate a representative to act as a liaison between the Vendor and the NH Department of Corrections for the duration of the Contract. The Vendor shall notify the NH Department of Corrections of such named Liaison within five (5) days after the award of the Contract: submit a written identification and notification to NH Department of Corrections of the name, title, address, telephone number, fax number and e-mail address of one (1) individual within its organization as a duly authorized representative to whom all correspondence, official notices and requests related to the Vendor's performance under the Contract.
- 7.7.1. Any written notice to the Vendor shall be deemed sufficient when deposited in the U.S. mail, postage prepaid and addressed to the person designated by the Vendor under this paragraph.
- 7.7.2. The Vendor shall have the right to change or substitute the name of the individual described above as deemed necessary provided that any such change is not effective until the Commissioner of the NH Department of Corrections actually receives notice of this change.
- 7.7.3. Changes of the named Liaison by the Vendor must be made in writing and forwarded to: NH Department of Corrections, Director of Human Resources, P.O. Box 1806, Concord, NH 03302.
- 7.8. Vendor Liaison's Responsibilities: The representative shall be responsible for:
- 7.8.1. representing the Vendor on all matters pertaining to the Contract. Such a representative shall be authorized and empowered to represent the Vendor regarding all aspects of the Contract;
- 7.8.2. monitoring the Vendors compliance with the terms of the Contract;
- 7.8.3. receiving and responding to all inquiries and requests made by NH Department of Corrections in the time frames and format specified by NH Department of Corrections in this RFP and in the Contract; and
- 7.8.4. meeting with representatives of NH Department of Corrections on a periodic or as-needed basis to resolve issues which may arise.
- 7.9. NH Department of Corrections Contract Liaison Responsibilities: The NH Department of Corrections Commissioner of Corrections, or designee, shall act as liaison between the Vendor and NH Department of Corrections for the duration of the Contract. NH Department of Corrections reserves the right to change its representative, at its sole discretion, during the term of the Contract, and shall provide the Vendor with written notice of such change. NH Department of Corrections representative shall be responsible for:

Vendor Initials: \_\_\_\_\_

- 7.9.1. representing NH Department of Corrections on all matters pertaining to the Contract. The representative shall be authorized and empowered to represent NH Department of Corrections regarding all aspects of the Contract subject to the New Hampshire Governor and Executive Council approval, where needed;
- 7.9.2. monitoring compliance with the terms of the Contract;
- 7.9.3. responding to all inquiries and requests related to the Contract made by the Vendor, under the terms and in the time frames specified by the Contract;
- 7.9.4. meeting with the Vendor's representative on a periodic or as-needed basis and resolving issues which arise; and
- 7.9.5. informing the Vendor of any discretionary action taken by NH Department of Corrections pursuant to the provisions of the Contract.
- 7.10. Reporting Requirements: The Vendor shall provide reports as requested below:
  - 7.10.1. the Vendor shall provide any and all reports as requested on an as needed basis according to a schedule and format to be determined by the NH Department of Corrections including but not limited to monthly summary of the sales of services provided by the inmates/patients;
  - 7.10.2. any information requested by the NH Department of Corrections; and
  - 7.10.3. review reports submitted by the Vendor. NH Department of Corrections shall determine the acceptability of the reports. If they are not deemed acceptable, NH Department of Corrections shall notify the Vendor and explain the deficiencies;
- 7.11. Performance Evaluation: NH Department of Corrections shall, at its sole discretion:
  - 7.11.1. monitor and evaluate the Vendor's compliance with the terms of the Contract;
  - 7.11.2. meet with the Vendor at a minimum of twice a year to assess the performance of the Vendor relative to the Vendor's compliance with the Contract as set forth in the approved Contract document; and
  - 7.11.3. request additional reports the NH Department of Corrections deems necessary for the purposes of monitoring and evaluating the performance of the Vendor under the Contract.

## 8. Other Contract Provisions:

- 8.1. Modifications to the Contract: In the event of any dissatisfaction with the Vendor's performance, the NH Department of Corrections will inform the Vendor of any dissatisfaction and will include requirements for corrective action.
  - 8.1.1. The Department of Corrections has the right to terminate the Contract, if the NH Department of Corrections determines that the Vendor is:
    - not in compliance with the terms of the Contract, or; and
    - as otherwise permitted by law or as stipulated within this Contract.
- 8.2. Coordination of Efforts: The Vendor shall fully coordinate their activities in the performance of the Contract with those of the NH Department of Corrections. As the work of the Vendor progresses, advice and information on matters covered by the Contract shall be made available by the Vendor to NH Department of Corrections as requested by NH Department of Corrections throughout the effective period of the Contract.
- 8.3. Disabilities Act and the Governor's Commission of the Disabled: The Vendor must be equipped to provide handicap access to services as per the American's with Disabilities Act and the Governor's Commission of the Disabled.

Vendor Initials: \_\_\_\_\_

**9. Bankruptcy or Insolvency Proceeding Notification:**

- 9.1. Upon filing for any bankruptcy or insolvency proceeding by or against the Vendor, whether voluntary or involuntary, or upon the appointment of a receiver, trustee, or assignee for the benefit of creditors, the Vendor must notify the NH Department of Corrections immediately.
- 9.2. Upon learning of the actions herein identified, the NH Department of Corrections reserves the right at its sole discretion to either cancel the Contract in whole or in part, or, re-affirm the Contract in whole or in part.

**10. Embodiment of the Contract:**

- 10.1. The Contract between the NH Department of Corrections and the Vendor shall consist of:
  - 10.1.1. the Request for Proposal (RFP) and any amendments thereto;
  - 10.1.2. the proposal submitted by the Vendor in response to the RFP; and/or
  - 10.1.3. a negotiated document (Contract) agreed to by and between the parties that is ratified by a "meeting of the minds" after careful consideration of all of the terms and conditions and that which is approved by the Commissioner of the NH Department of Corrections and the Governor and Executive Council of the State of New Hampshire.
- 10.2. In the event of a conflict in language between the documents referenced above, the provisions and requirements set forth and/or referenced in the negotiated document noted in 10.1.3. shall govern.
- 10.3. The NH Department of Corrections reserves the right to clarify any contractual relationship in writing with the concurrence of the Vendor, and such written clarification shall govern in case of conflict with the applicable requirements stated in the RFP or the Vendor's Proposal and/or the result of a Contract.

**11. Cancellation of Contract:**

- 11.1. The Department of Corrections may cancel the Contract at any time for breach of contractual obligations by providing the Vendor with a written notice of such cancellation.
- 11.2. Should the NH Department of Corrections exercise its right to cancel the Contract for such reasons, the cancellation shall become effective on the date as specified in the notice of cancellation sent to the Vendor.
- 11.3. The NH Department of Corrections reserves the right to terminate the Contract without penalty or recourse by giving the Vendor a written notice of such termination at least sixty (60) days prior to the effective termination date.
- 11.4. The NH Department of Corrections reserves the right to cancel the Contract for the convenience of the State with no penalties by giving the Vendor sixty (60) days notice of said cancellation.

**12. Vendor Transition:**

NH Department of Corrections, at its discretion, in any Contract resulting from this RFP, may require the Vendor to work cooperatively with any predecessor and/or successor Vendor to assure the orderly and uninterrupted transition from one Vendor to another.

**13. Audit Requirement:**

Contractor agrees to comply with any recommendations arising from periodic audits on the performance of this contract, providing they do not require any unreasonable hardship, which would normally affect the value of the Contract.

Vendor Initials: \_\_\_\_\_

**14. Additional Items/Locations:**

Upon agreement of both parties, additional equipment and/or other facilities may be added to the Contract. In the same respect, equipment and/or facilities listed as part of the provision of services of the Contract may be deleted as well.

**15. Information:**

- 15.1. In performing its obligations under the Contract, the Vendor may gain access to information of the inmates/patients, including confidential information. The Vendor shall not use information developed or obtained during the performance of, or acquired or developed by reason of the Contract, except as is directly connected to and necessary for the Vendor's performance under the Contract.
- 15.2. The Vendor agrees to maintain the confidentiality of and to protect from unauthorized use, disclosure, publication, reproduction and all information of the inmate/patient that becomes available to the Vendor in connection with its performance under the Contract.
- 15.3. In the event of unauthorized use or disclosure of the inmates/patients information, the Vendor shall immediately notify the NH Department of Corrections.
- 15.4. All material developed or acquired by the Vendor, as a result of work under the Contract shall become the property of the State of New Hampshire. No material or reports prepared by the Vendor shall be released to the public without the prior written consent of NH Department of Corrections.

**16. Special Notes:**

- 16.1. The headings and footings of the sections of this document are for convenience only and shall not affect the interpretation of any section.
- 16.2. The NH Department of Corrections reserves the right to require use of a third party administrator during the life of the Contract.
- 16.3. Locations per contract year may be increased/decreased and or reassigned to alternate facilities during the Contract term at the discretion of the Department. Locations may be added and/or deleted after the awarding of a Contract at the discretion of the Department and upon mutual agreement of the Commissioner of the Department of Corrections and the Vendor.
- 16.4. In the event that the NH Department of Corrections wishes to add or remove facilities at which the Contractor is to provide services, it shall:
  - 16.4.1. give the Contractor fourteen (14) days written notice of the proposed change; and
  - 16.4.2. secure the Contractor's written agreement to the proposed changes.
- 16.5. Notwithstanding the foregoing, or any provision of this Agreement to the contrary, in no event shall changes to facilities be allowed that modify the "Completion Date" or "Price Limitation" of the Agreement.
- 16.6. Any change in the Contract including the Vendor responsibilities and NH Department of Corrections responsibilities described herein, whether by modification and or supplementation, must be accomplished by a formal Contract amendment signed and approved by and between the duly authorized representatives of the Vendor and the NH Department of Corrections approved by the Governor and Executive Council.

**The remainder of this page is intentionally blank.**

Vendor Initials: \_\_\_\_\_

**17. Appointment Scheduling Options (check the appropriate box):**

<b><u>Availability:</u></b>	<b><u>Yes</u></b>	<b><u>No</u></b>
Appointment within twenty-four (24) hours	<input type="checkbox"/>	<input type="checkbox"/>
Appointment within forty-eight (48) hours	<input type="checkbox"/>	<input type="checkbox"/>
Appointment within seventy two (72) hours	<input type="checkbox"/>	<input type="checkbox"/>
Appointment within one (1) week	<input type="checkbox"/>	<input type="checkbox"/>
Weekend appointments available	<input type="checkbox"/>	<input type="checkbox"/>
Evening appointments available	<input type="checkbox"/>	<input type="checkbox"/>

Vendor Initials: \_\_\_\_\_

**SECTION C: Method of Payment/Estimated Budget, Exhibit B**

The Vendor proposes to provide Pre-Assignment and Fitness for Duty Exam Services for the New Hampshire Department of Corrections (NHDOC) prospective employees in conformance with all terms and conditions of this RFP and the Vendor provides pricing information as an Attachment to this proposal for providing such products and services in accordance with the provisions and requirements specified in this RFP document.

The pricing information quoted by the Vendor as an attachment to this document represents the total price(s) for providing any and all service(s) according to the provisions and requirements of the RFP, which shall remain in effect through the end of this procurement process and throughout the contracting process until the contract completion date as listed on the State Contract form P/37, section 1.16 - Completion Date.

---

AUTHORIZED SIGNATURE

---

DATE

---

NAME AND TITLE OF SIGNOR (Please Type)

THE VENDOR ASSUMES ALL RISKS THAT ACTUAL FUTURE FIGURES MAY VARY FROM POPULATION PRESENTED AS PART OF THIS RFP.

If the NH Department of Corrections determines it is in the best interest of the State, it may seek a “*BEST AND FINAL OFFER*” from vendors submitting acceptable and/or potentially acceptable proposals. The “*BEST AND FINAL OFFER*” would provide a Vendor the opportunity to amend or change its original proposal to make it more acceptable to the State. NH Department of Corrections reserves the right to exercise this option.

Financial responsibility for preparation of proposals is the sole responsibility of the Vendor. The solicitation of the Request for Proposals shall not commit the NH Department of Corrections to award a Contract(s).

Financial commitment by the NH Department of Corrections will not occur until such time as the Governor and the Executive Council of the State of New Hampshire approve a Contract(s).

Vendor Initials: \_\_\_\_\_

**SECTION C: Method of Payment/Estimated Budget, Exhibit B**

**1. Method of Payment:**

- 1.1. Services are to be invoiced monthly commencing thirty (30) days after the start of service. Due dates for monthly invoices will be the 15<sup>th</sup> of the month following the month in which services are provided.
- 1.2. Invoices shall be submitted no later than sixty (60) days post date of services rendered.
- 1.3. Invoices shall be sent to the NH Department of Corrections, c/o Director of Human Resources, PO Box 1806, Concord, NH 03302-1806
- 1.4. Once approved, the original invoices shall be forwarded to the Accounts Payable division of the Department's Bureau of Financial Services for processing and issuance of payment.
- 1.5. The NH Department of Corrections may make adjustments to the payment amount identified on a Vendors monthly invoice. The NH Department of Corrections shall suspend payment to an invoice if an invoice is not submitted in accordance with the instructions established by the NH Department of Corrections.
- 1.6. The NH Department of Corrections Bureau of Financial Services may issue payment to the Contractor within thirty (30) days of receipt of an approved invoice. Invoices shall be itemized by facility and contain the following information:
  - 1.6.1. invoice date & number, facility and clients name receiving the Pre-Assigned and/or Fitness for Duty Exam;
  - 1.6.2. quantity, description of services rendered;
  - 1.6.3. dates of said service(s); and
  - 1.6.4. cost of services.
- 1.7. Contractor invoices shall be limited to services performed according to the Pricing Schedule Quotation.
- 1.8. Payment shall be made to the name and address identified in the Contract as the "Contractor" unless: (a) the Contractor has authorized a different name and mailing address in writing or; (b) authorized a different name and mailing address in an official State of New Hampshire Contractor Registration Application Form; or (c) unless a court of law specifies otherwise. The Contractor shall not invoice federal tax. The State's tax-exempt certificate number is 026000618W.

**The remainder of this page is intentionally blank.**

Vendor Initials: \_\_\_\_\_



**2. Estimated Budget:**PRICING SCHEDULE QUOTATION AND ESTIMATED BUDGET

<b>Name of Contractor:</b> (must be the same as found of the Certificate of Good Standing)	
--	--

Item #	Description of Services	Est. Vol.	Quotation	Total Cost (Est. Vol. X Quotation)
1.	Pre-Assignment Physical Examination for Officers (inclusive of Mantoux, Dipstick u/a & Audiology)			
2.	Pre-Assignment Physical Examination for Civilians (inclusive of Mantoux & Dipstick u/a)			
3.	Audiology Screen using Audiometer			
4.	Mantoux Test			
5.	Electrocardiogram (EKG)			
6.	Chest X-Ray (CXR)			
7.	Hepatitis B Vaccine - [Series of three (3)] -- COST PER DOSE			
8.	General Fitness for Duty Examination (specific to occupational demands and/or individual medical condition)			
9.	Duty Specific Fitness for Duty Evaluation (inclusive of Medical Questionnaire Review)			

Annual Est. Budget (Sum of Total Cost Column)

Total Est. Budget (Total Cost Column X 2 Years)

Vendor Initials: \_\_\_\_\_

**Section D: Special Provisions, Exhibit C**

**1. Special Provisions:**

- 1.1. There are no additional provisions set forth in this Exhibit, Special Provisions, to be incorporated as part of this Contract.

**The remainder of this page is intentionally blank.**

**Vendor Initials:** \_\_\_\_\_

Section E: Letter of Intent

<b>RSVP: LETTER OF INTENT TO BID</b> <b>TO CONTRACT WITH THE NEW HAMPSHIRE DEPARTMENT OF CORRECTIONS</b> <b>DIVISION OF ADMINISTRATION</b>
--

Required Letters of Intent to bid must be received at the NH Department of Corrections by the deadline below:

Check	Description	Deadline
<input type="checkbox"/>	Letter of Intent to bid	January 21, 2011 by 10:00AM, EST

Letters of Intent can be faxed to 603-271-5639 and/or e-mailed to: [jlind@nhdoc.state.nh.us](mailto:jlind@nhdoc.state.nh.us)

**To:** NH Department of Corrections  
Division of Administration  
Contract and Grant Administrator  
P.O. Box 1806  
Concord, NH 03302

**Re:** Letter of Intent to Bid for RFP NHDOC 11-02-GFHR

APPLICANT INFORMATION

<b>Legal Name of Agency:</b>	
<b>Officer Authorized to Sign a Contract:</b>	
<b>Street Address:</b>	
<b>City, State and Zip Code:</b>	
<b>Telephone:</b>	
<b>Fax:</b>	
<b>E-mail address:</b>	
<b>Contact Person and Title:</b>	

I understand that proposals are due by 2:00 PM, EST on 2/11/2011 and will not be accepted after that time.

\_\_\_\_\_  
(to be signed by contact person listed above).

Please indicate below the RFP Number, RFP Name and Location of Service(s) for which your agency intends to submit a proposal(s) for:

RFP Number:	RFP Name:	Location of Service(s)

Vendor Initials: \_\_\_\_\_

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